

PART III: CLASSROOM DRIVER EDUCATION INSTRUCTION					
CALCULATION OF TOTAL CLASSROOM MINUTES OF DRIVER EDUCATION INSTRUCTION					
A.		×		=	
	Length of class in minutes		Number of days of instruction specifically on driver education		Total classroom minutes of driver education (Minimum of 1800 minutes)
B.	Is driver education a graduation requirement in your charter school or district?		Y <input type="checkbox"/>	N <input type="checkbox"/>	

PART IV: BEHIND-THE-WHEEL DRIVER EDUCATION INSTRUCTION	
Note: Every student completing the driver education program must receive at least 6 clock hours of behind-the-wheel driving instruction. These hours must be actual driving time, not passenger/observer time. At least 3 hours of the required total of 6 hours must be on-the-street driving instruction. The remainder may be accrued using simulators and/or multi-car driving ranges. (4 hours of simulator instruction equals 1 hour of behind-the-wheel instruction.)	
A.	Does your driver education program use simulators? <input type="checkbox"/> <input type="checkbox"/> If YES , how many hours of simulator instruction does each student receive? _____ hours If YES , how many hours of on-the-street or multi-car driving range instruction does each student receive? _____ hours <div style="text-align: right; margin-right: 50px;">(Must be at least 3 hours)</div> If NO , how many hours of on-the-street or multi-car driving range instruction does each student receive? _____ hours <div style="text-align: right; margin-right: 50px;">(Must be at least 6 hours)</div>
B.	What is the fee charged for behind-the-wheel instruction: _____
C.	What is the fee charged for classroom instruction: _____

PART V: CONTINUING EDUCATION/PROFESSIONAL DEVELOPMENT FOR INSTRUCTIONAL STAFF			
Note: List each instructor from Part II and list the most recent continuing education (CE) or professional development (PD) received that was directly related to driver education.			
Instructor Name (from Part II)	Name of CE or PD Course/Training/Conference	Name of Organization That Sponsored CE or PD	Date Attended

PART VI: SIGNATURE		
I certify that the information provided in this application is true and accurate, and represents the driver education program as it will be conducted this year.		
SIGNATURE OF SUPERINTENDENT OR PRINCIPAL	TITLE	DATE

*Must have a valid Arizona drivers license